

4486

## STANDARD CERTIFICATE OF DEATH

C-2---8

1. Place of Death

County Maricopa State ARIZONA  
City or Town Phoenix

2. Full Name

Mrs. J. W. Rogers,  
Address Tempe

Personal and Statistical Particulars

Sex	Color	Single, Married, Wid- owed or Divorced
Female	American	Married
Age <u>37</u>		
Birthplace _____		
Burial, Cremation or Removal: Place <u>Detroit, Mich.</u>		
Undertaker <u>Mohn &amp; Dorris</u>		

Medical Certificate

Date of Death Feb. 2, 1904  
Cause Bright's Disease

Duration \_\_\_\_\_

B. B. Moeur  
Doctor or Attendant

Filed \_\_\_\_\_

\_\_\_\_\_  
Registrar